



United States Department of the Interior

BUREAU OF LAND MANAGEMENT
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Denver, Colorado 80225-0047

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November 5, 1999

EMS TRANSMISSION
Information Bulletin No. HR-2000-017

To: All BC, HR, NI, RS, SNPIT, and WO Field BIA Liaison Office Employees
From: Director, National Human Resources Management Center
Subject: Open Season - Federal Employees Health Benefits (FEHB) DD: 12/13/99

Open Season for Federal Employees Health Benefits (FEHB) begins November 8 and continues through December 13, 1999.

During the open season, any eligible employee who is not currently registered may enroll, and any employee already enrolled may change from one plan or option to another, or from self only to self and family, or elect a combination of these changes. Enrollees who wish to continue their current enrollment will not need to take any action during this open season.

A Health Benefits Fair will be held on November 8, 1999 from 12:00 until 3:00 p.m. in the Rio Grande Room, Lobby Level, Building 67, Denver Federal Center. The Fair is also planned for November 9, 1999, at the same location from 8:00 a.m. until 3:00 p.m. Representatives from the major health carriers have been invited to attend and will be available to answer your questions.

The FEHB Guide for Employees, election form SF-2809, and health plan brochures will be available in the National Human Resources Management Center (NHRMC) during open season. Employees who wish to enroll or change their enrollment must complete the new Health Benefits Registration Form (SF-2809 dated July 1999). All previous editions will not be accepted.

Employees who wish to enroll or change their enrollment must complete and return to the NHRMC a Health Benefits Registration Form (SF-2809) or utilize their option to use Employee

Express to enroll or make a change by close of business December 13, 1999. Employee Express is available for open season changes and is accessed by dialing 1-800-827-6254 on a touch tone telephone. You will need your Personal Identification Number (PIN) to be able to use the Employee Express. Only one of these methods can be used by employees. Do not use both the enrollment form and Employee Express for open season changes.

Attached for your information is a brief description of the three types of plans available under the FEHB Program. For further information regarding health benefits or open seasons, please call Lenna Gerwing at (303) 236-6667.

Signed
Linda D. Sedbrook
Director

Authenticated
Darlene Robitaille
Secretary

1 Attachment
1 - Description of Plans (2 pp)

Distribution
RS-150, Library
NI-100, Central File
HR-200

The Three Types of Plans Available Under FEHB

1. Managed Fee-for-service Plans

These plans reimburse you or your health care provider for covered services after the services are received. If you enroll in one of these plans, you may choose your own physician, other health care providers and hospital.

These plans are considered “managed” because they all contain features such as precertification of hospital admissions and utilization review of ongoing care. In addition, most of the fee-for-service plans have preferred provider arrangements in many parts of the country. By using preferred providers, you can reduce your out-of-pocket expenses and, in some cases, receive enhanced benefits.

Fee-for-service plans include:

- Alliance Health Plan
- APWU Health Plan
- Blue Cross/Blue Shield Service Benefit Plan
- GEHA Benefit Plan
- Mail Handlers
- NALC
- Postmasters

2. Health Maintenance Organization Plans (HMO’s)

HMO’s provide a comprehensive array of medical services, emphasizing prevention and early detection of disease, through contracted physicians, hospitals, and other providers in particular locations. Each HMO is open to employees within the plan’s enrollment area. You cannot enroll in an HMO if you are located outside its enrollment area. Refer to each plan’s brochure if you have any questions about the enrollment area.

HMO Plans, and the areas they service, include:

- Aetna U.S. Healthcare - The Front Range
- Cigna Healthcare of CO - The Front Range area
- HMO Colorado/Nevada - Most of Colorado
- Kaiser Permanente - Denver/Colorado Springs areas
- Pacificare of Colorado - Denver/Pueblo/Col. Springs/Ft. Collins/LaPlata
- Either High or Standard Option
- Rocky Mountain HMO - Most of Colorado

3. Plans Offering a Point of Service (POS) Product

Some FEHB plans have begun to blend their features. A number of fee-for-service and HMO plans now offer both forms of health care delivery, known as “in network.” In an HMO that offers a POS product, the POS product acts like a fee-for-service plan: The HMO’s enrollees may use non-affiliated (out of the network) providers if they wish, but the services will cost them more in terms of deductibles and coinsurance, than if they used plan providers.

HMO Colorado/Nevada offers a POS Product

In a fee-for-service plan with a Preferred Provider Organization (PPO) there might also be an option to use non-PPO providers. Options vary within these plans and it is recommended the employee read the open season brochures of the plans they are interested in for specific information.

Temporary Continuation of Coverage - (TCC)

You should be aware that if you leave Federal employment, you will probably be eligible for TCC (unless you are separated for gross misconduct). TCC can continue your enrollment for up to 18 months. TCC is also available for up to 36 months for dependents who lose eligibility as family members under your enrollment. This includes spouses who lose coverage because of divorce and children who lose coverage because they marry or reach age 22. There are specific time frames in which you or your dependent will be eligible to enroll in TCC..

TCC enrollees must pay the total plan premium (there is no Government contribution) plus a 2% charge for administrative expenses.